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13 April 1978

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MEMORANDUM FOR: [Redacted]  
Office of Legislative Counsel

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VIA : Deputy Director of Personnel

FROM : [Redacted]  
Deputy Director of Personnel  
for Plans and Control

SUBJECT : OP Responses to the Civil Service Commission's  
"Supplementary Questions" Relative to the  
Draft Comprehensive Physicians Pay Bill and  
Comments on the Bill Proper

Since CIA has a very limited number of Physicians, and since many of OMB's questions are directed to organizations with large medical complements, we are responding only to those questions which we feel have significance for our organization.

Response to Question 1

The Agency has 25 physician positions. Patient care responsibility would be at the overseas posts where the doctor provides such services; however, it is suggested OMS provide the breakout of the number of doctors who have patient care responsibilities, viz health care responsibilities such as physical examinations, emergency treatment or administrative functions.

Response to Question 2

The Office of Medical Services indicates that they have been experiencing problems in the recruitment of physicians. We shall yield to them in articulating the specifics of the problem.

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Response to Questions 3 and 4

We defer to the Office of Medical Services for a comprehensive response to these questions.

Response to Question 5

Establishing a Federal compensation system for a single occupation for which pay is based on the income in the private sector for that occupation would certainly be precedent setting. While the government's current problem is obtaining doctors to provide patient care in VA hospitals and in the military services, there could well be future problems with obtaining and retaining the services of lawyers, engineers, or whatever discipline or profession comes up in short supply and consequent higher private sector salaries or income.

Response to Question 6

To base compensation of salaried Federal physicians on the compensation of non-Federal physicians would require evaluating the benefits of Federal employment . . . retirement plans, paid leave, security of position, specialized training, sabbaticals, and medical malpractice protection. How would the salary level be decided . . . physician income varies from generalist to specialist field to other specialist fields, geographic area, et al. To take the average might well deprive the specialist; to take the high side would overpay the non-specialist.

Response to Question 7

A pay scale for a group of employees which could exceed the salary level of the head of the sub-organization responsible for administration of the medical facilities and services should be carefully considered. Granting the government may need to develop a program to attract medical personnel for needed services, the bonus system would probably be less disruptive of the hierarchical relationships within an agency. Either a different salary scale or a bonus system would certainly set a precedent for subsequent professions employed in the Federal Service.

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Response to Question 8

We have no comment on the advantages or disadvantages of including PHS commissioned corps in a Federal civilian compensation plan. If there is difficulty in obtaining the services of physicians for other Government agencies, it would appear there would be equal difficulty in obtaining them for the PHS corps.

If "the same personnel system" means agencies would obtain their doctors through a central system, CIA would have the usual problems of security, and would undoubtedly have to request an exemption from being included in such personnel system, albeit "adopting" the salary scale or bonus system for the doctors employed here.

Response to Question 9

Annually adjusted "pay levels" (bonuses) would be far less disruptive than a statutory change in the basic pay system and should help alleviate the current recruitment and retention problem.

Comments on the Bill

If all physicians employed by the Government are to be included in the Comprehensive Physicians Pay Bill, we would fully support inclusion of CIA's Physicians in the coverage.

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